

Employment Application

Rivercrest Cabana Club 450 Rivercrest Drive Piscataway, NJ 08854

Provide below the position(s) applying for :		Notice to Applicants	
☐ Full-Time Lifeguard ☐ Substitution Lifeguard ☐ Manager ☐ Swim Team Coach	Rivercrest Cabana Club maintains a ZERO TOLERANCE for child abuse and/or substance abuse. We take pride in providing a safe environment for all children, members and staff.		
PERSONAL INFORMATION: Please print legibly. Application monsidered for employment.	าust be comp	leted in full and signed to be	
Full Name		Date of Application	
Street Address		Home Phone	
City, State, Zip		Cell Phone	
Email		Are you 18 years of age or older? Yes No	
Emergency Contact Name and Relationship		Emergency Phone	
Were you previously employed with Rivercrest Cabana Club?			
Do you have any physical limitations that preclude you from performing a No	any work you ar	e being considered for?	
Do you have any pending charges or ever pled guilty or been convicted o drunk driving offense, or other violation of the law? Do not include convictourt. No If YES, please explain:			
* Answering yes to the above question does not constitute an automatic bar from employment but will be considered in relation to the position sought.			

EMPLOYMENT & VOLUNTEER HISTORY

Provide the following information for current and past employers or volunteer assignments, starting with the most recent, use additional sheets if necessary.

Employer / Organization Phone	Dates of Employment Month / Year	Summarize type of work performed and job responsibilities
Street Address, City, State, Zip	From	
	/	
Job title (s)	То	
	/	
Name of immediate supervisor and title	Email Address	
Reason for leaving	May we contact?	
	Yes No	
	_	
Employer / Organization Phone	Dates of Employment Month / Year	Summarize type of work performed and job responsibilities
Street Address, City, State, Zip	From	
	/	
Job title (s)	То	
	/	
Name of immediate supervisor and title	Email Address	
Reason for leaving	May we contact?	
Reason for leaving	iviay we contact:	
	Yes No	
Employer / Organization Phone	Dates of Employment Month / Year	Summarize type of work performed and job responsibilities
Street Address, City, State, Zip	From	·
	/	
Job title (s)	То	
Name of immediate supervisor and title	Email Address	
Reason for leaving	May we contact?	
	Yes No	

NON-EMPLOYMENT RECORD: Please explain any gaps in your employment history. To From Reason Yr. Yr. Mo. Mo. Yr. Yr. Mo. Mo. Yr. Mo. Mo. Yr. **EDUCATION** School Name & Address Major Course or Degree Diploma / Degree / Certificate (High School, College, Trade) Program Received **SKILLS:** Please summarize qualifications acquired from employment or other experience relevant to position. **CERTIFICATIONS** Do you hold current **CPR** certification? Yes ☐ No Expiration _____ Do you hold current **First Aid** certification? Yes Expiration _____ Do you hold current **Lifeguarding** certification? Yes No Expiration _____ Do you hold current **AED/OXYGEN** certification? Yes Expiration _ **Other Certifications / Licenses REFERENCES** Provide at least two professional references (employers, teachers, coaches etc.) and three personal references, who can attest to your abilities and suitability for employment. One reference must be a family member. Street Address, City, State, Zip Relationship Name Phone 1. 2. 3. 4. 5.

Applicant Statement

Leastife, the tell information I have provided in endoute annual for and account would	
I certify that all information I have provided in order to apply for and secure work we complete, and correct, and I understand that any information provided found to be any respect, will be sufficient cause to cancel further consideration of this application from Rivercrest Cabana Club's service, whenever it is discovered.	false, incomplete or misrepresented in
I expressly authorize, without reservation, the Rivercrest Cabana Club, its represent and obtain information from all references (personal and professional), employers, educational institutions and to otherwise verify the accuracy of all information provigob interview, I hereby waive any and all rights and claims I may have regarding the employees, or representatives, for seeking, gathering and using such information in persons, corporations, organizations for furnishing such information about me. I am written request for disclosure of the nature and scope of any report that may be organized.	public agencies, licensing authorities and vided by me in this application, resume or Rivercrest Cabana Club, its agents, a the employment process and all other a aware that I have the right to make a dered.
	Initial
I am not a child molester, abuser or pedophile, and have not been accused of being	a molester or abuser. Initial
I understand that the Rivercrest Cabana Club does not discriminate in hiring or emp color, religious creed, national origin, sexual orientation, genetic information, marit ancestry; or on the basis of a physical or mental handicap not limiting the applicant available. The Rivercrest Cabana Club will give this application every reasonable cor Rivercrest Cabana Club makes no commitment of employment to the applicant.	al/civil union status, veteran's status, 's ability to perform satisfactorily the job
I understand that this application remains current for only 90 days. At the conclusion the Rivercrest Cabana Club, and still wish to be considered for employment, it may application. Employment with the Rivercrest Cabana Club is employment at will, when the conclusion of the conclu	be necessary to reapply and fill out a new
employment at any time, for any reason; and that the employer (Rivercrest Cabana time for any reason, with or without cause.	· · · · · · · · · · · · · · · · · · ·
	Club) may terminate employees at any Initial gal authority to work in the United States
time for any reason, with or without cause. I understand that if I am hired, I will be required to provide proof of identity and leg	Club) may terminate employees at any Initial gal authority to work in the United States regard.
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I understand that if I am hired, I will be required to provide proof of identity and leg and that federal immigration laws require me to complete a USCIS FORM I-9 in this I certify that I have read, fully understand and accept all terms of the foregoing app	Club) may terminate employees at any Initial gal authority to work in the United States regard. licant statement.
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